The sooner you stop before your op, the better

Stopping smoking at least 8 weeks before surgery reduces your risk of a range of complications. If you smoke, you have a 1 in 3 risk of post-operative breathing problems. This can be reduced to 1 in 10 if you stop 8 weeks before your op.

Smoke-free days can help

Unfortunately, not everyone knows they are going to have surgery until they actually need it. Stopping 72 or 48 hours before an operation can decrease some of the risks. Carbon monoxide and nicotine are cleared from the body in a matter of days. This can help to improve healing and recovery.

For friendly support and advice, just call:

01493 452067 or 0800 652 3477

to speak to your local Stop Smoking Service team

Patient Liaison, Complaints and Compliments

By Telephone 01502 718666

Geraldine Adams, Patient Liaison Manager East Coast Community Healthcare Beccles House 1 Common Lane North Beccles Suffolk NR34 9BN

By Email

In Writing

ECCH.patientliaison@nhs.net

If you would like this leaflet in large print, audio cassette, Braille or in a different language please contact Andrea Dawson on 01502 718600







STOP

If you are waiting for an operation then it is very important that you stop smoking as soon as possible. Smoking greatly increases the risk of complications during and after surgery. Some operations are not even an option for smokers.

- Smokers are far more likely to have anaesthesiarelated complications.
- Smoking can delay your recovery and the wounds are slower to heal.

Smoking increases the risk of anaesthesia complications

If you smoke 10 cigarettes a day you have 6 times more risk of postoperative breathing problems. This risk increases the more you smoke and the longer you have smoked. There are several reasons for this:

- Smokers need more anaesthesia for all surgery Anaesthesia helps to reduce spasms and coughing during and after an operation. But because the tar in tobacco smoke constantly irritates the lungs, smokers need more anaesthesia to lessen these problems. This gives a higher risk of anaesthesia-related complications.
- Smokers have a higher chance of chest infections after surgery

Smoking destroys the little hairs or cilia that help to clean out your lungs. The mucus in smokers' lungs is contaminated with tar and other poisons in tobacco smoke. After anaesthesia it is very important for all patients to clear mucus out of the lungs. Even non-smokers are at risk of post-op pneumonia if the lungs don't clear the mucus. But the risk for smokers is much greater as the lungs cannot clean themselves. The poisons in tobacco smoke build up and cause a higher risk of chest infections.

• Smokers spend longer in the recovery room and need extra oxygen

All patients go to the recovery room after an operation until they are considered stable enough to return to the ward. But smokers need a lot more time in the recovery room before they stabilise. Light smokers spend as long recovering as heavy smokers so cutting down is not an option. After anaesthesia the blood is unable to supply enough oxygen to the body and most patients are given extra oxygen in the recovery room. Because the carbon monoxide in tobacco smoke robs the blood of oxygen then smokers need more oxygen even after they leave the recovery room.

Smokers have slower wound healing

Smokers have slower healing of wounds whether they are caused by surgery, injury or disease.

Smokers have less oxygen to help healing

Healing is helped by plenty of oxygen in the blood reaching the wound. But nicotine in tobacco smoke makes the blood vessels tighten and this reduces the amount of blood reaching the wound. Then the carbon monoxide in smoke robs the blood of oxygen. The wound cannot heal as not only is there a reduced blood flow but also there is a lower level of oxygen in the blood.

Nicotine causes other problems for healing

Nicotine in tobacco smoke damages the production of red blood cells that carry essential healing chemicals to the scar tissue. Nicotine also makes blood platelets 'sticky'. Platelets are a type of blood cell needed for clotting. This can lead to lots of small blood clots at the site of the wound. This reduces the blood flow to the area and slows the healing process.

Examples of surgical risks for smokers

Hand Surgery

Reduced blood flow is a great concern also for hand surgery because there are so many tiny blood vessels in the hands. Smoking a single cigarette can reduce the blood flow to the hand and would cause severe shortage of oxygen needed to aid healing.

Back Surgery

Smokers' bones are slower to grow and repair than non-smokers' bones. When smokers need surgery to fuse the vertebrae in the back they are 3 to 4 times more likely to have problems. The bones must build new bone cells. Non-smokers' bones can grow 1cm every 2 months. Smokers can take on average 3 months to grow the same amount of bone.

Plastic and reconstructive surgery

Slowing down the healing of wounds is a big problem for this surgery, as it usually involves the transfer of flaps of skin from one part of the body to another. To survive, the skin needs a healthy blood supply and lots of oxygen and smokers have a reduced blood flow, the skin being transferred has a much lower chance of survival. Smokers have about 12.5 times greater risk of plastic surgery not being successful.

